# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

# CHAPTER 13 PLAN AND RELATED MOTIONS

			IN A KELATIED MOTOTO		
Name	of Debtor	(s):	Barbara Ann Bland	Case No: 16-35915	-KRH
This pl	lan, dated	Apri	<b>1 4, 2018</b> , is:		
		<u></u>	the <i>first</i> Chapter 13 plan filed in this case. a modified Plan, which replaces the confirmed or unconfirmed Plan dated January 26, 2018	<u>L</u> .	• .
			Date and Time of Modified Plan Confirmation Hearing:  May 9, 2018 at 11:10 a.m.		
			Place of Modified Plan Confirmation Hearing:  Judge Huennekens', Courtroom 5000, 701 East Broad Street	, Richmond, VA 23	21 <u>9</u>
		Section	lan provisions modified by this filing are: on 2 (Plan Funding); Section 3A (Add Attorney's Fees); Section t Card)	on 4A (Cramdown	Cross-Collateralized
			tors affected by this modification are: nia Credit Union; All General Unsecured Creditors		
1. Noti	ces				
To Cre	ditors:				
careful	ights may lly and dis consult o	scuss it	fected by this plan. Your claim may be reduced, modified, or t with your attorney if you have one in this bankruptcy case.	eliminated. You sh If you do not have	ould read this plan an attorney, you may
confirn Court.	nation at l The Ban	least 7 krupto	s treatment of your claim or any provision of this plan, you od days before the date set for the hearing on confirmation, unley Court may confirm this plan without further notice if no ole. In addition, you may need to file a timely proof of claim in o	ess otherwise orde bjection to confirm	red by the Bankruptcy nation is filed. See
The fol	lowing m	atters	may be of particular importance.		
			e box on each line to state whether or not the plan includes e led" or if both boxes are checked, the provision will be ineffe		
Α.			amount of a secured claim, set out in Section 4.A which may tial payment or no payment at all to the secured creditor	<b>∡</b> Included	☐ Not included
В.			judicial lien or nonpossessory, nonpurchase-money st, set out in Section 8.A	Included	Not included
C.	Nonstan	dard p	provisions, set out in Part 12	Included	✓ Not included
2.			un. The debtor(s) propose to pay the Trustee the sum of \$_372.0	0 per month	for 22 months,
Other p	ayments to	the T	rustee are as follows: \$5,300.00 Paid into the Plan as of April 4	. 2018.	
F.			unt to be paid into the Plan is \$ 13,484.00 .	<u> </u>	
3.			tors. The Trustee shall pay allowed priority claims in full unless	the creditor agrees	otherwise.

Page 1

The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10% of all sums

Administrative Claims under 11 U.S.C. § 1326.

A.

1.

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received under the plan.

^	~			1 .
2.	• •	neck	One	box:

- Debtor(s)' attorney has chosen to be compensated pursuant to the "no-look" fee under Local Bankruptcy Rule 2016-1(C)(1)(a) and (C)(3)(a) and will be paid \$ 3,723.00 , balance due of the total fee of \$ 4,223.00 concurrently with or prior to the payments to remaining creditors.
- Debtor(s)' attorney has chosen to be compensated pursuant to Local Bankruptcy Rule 2016-1(C)(1)(c)(ii) and must submit applications for compensation as set forth in the Local Rules.

#### B. Claims under 11 U.S.C. § 507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid pursuant to 3.C below:

Creditor	
-NONE-	

Type of Priority

**Estimated Claim** 

Payment and Term

#### C. Claims under 11 U.S.C. § 507(a)(1).

The following priority creditors will be paid prior to other priority creditors but concurrently with administrative claims above.

Creditor -NONE-

Type of Priority

**Estimated Claim** 

Payment and Term

- 4. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
  - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 4(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 5 of the Plan.

The following secured claims are to be "crammed down" to the following values:

<u>Creditor</u> Virginia Credit Union	<u>Collateral</u> <b>2004 Nissan Maxima</b>	Purchase Date 07/29/2014	Est. Debt Bal. 3,000.00	Replacement Value 1,766.00
Virginia Credit Union	2004 Nissan Maxima and 2007 Audi A4	05/14/2015	4,156.00	0.00
Virginia Credit Union	2007 Audi A4	07/03/2015	7,000.00	5,257.00

#### B. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay under §§ 362(a) and 1301(a) as to the interest of the debtor(s), any co-debtor(s) and the estate in the collateral.

Creditor -NONE- Collateral Description

Estimated Value

**Estimated Total Claim** 

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#### C. Adequate Protection Payments.

The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 4(D) and/or 7(B) of the Plan, as follows:

 Creditor Virginia Credit Union
 Collateral 2004 Nissan Maxima
 Adeq. Protection Monthly Payment 96.06
 To Be Paid By Trustee

 Virginia Credit Union
 2007 Audi A4
 74.69
 Trustee

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 7(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

D. Payment of Secured Claims on Property Being Retained (except those loans provided for in section 6 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, whichever is less, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. Upon confirmation of the Plan, the valuation specified in sub-section A and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

Creditor	<u>Collateral</u>	Approx. Bal. of Debt or	Interest Rate	Monthly Payment &
Virginia Credit Union	2004 Nissan Maxima	"Crammed Down" Value 1,766.00	1.5%	Est. Term 54.00 x 36 months
Virginia Credit Union	2007 Audi A4	5,257.00	1.5%	148.22 x 36 months

#### E. Other Debts.

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' principal residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 6 of the Plan.

#### 5. Unsecured Claims.

- A. Not separately classified. Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately \_\_5\_%. The dividend percentage may vary depending on actual claims filed. If this case were liquidated under Chapter 7, the debtor(s) estimate that unsecured creditors would receive a dividend of approximately \_\_0\_%.
- B. Separately classified unsecured claims.

Creditor
U.S. Dept. of Education

Basis for Classification

Treatment

.S. Dept. of Education Student Le

Student Loans

Paid directly by Debtor

- 6. Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Principal Residence; Other Long Term Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any existing default under 11 U.S.C. § 1322(b)(5).
  - A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without interest unless an interest rate is designated below for interest to be paid on the arrearage claim and such interest is provided for in the loan agreement. A default on the regular contract payments on the debtor(s) principal residence is a default under the terms of the plan.

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Credit -NONE	E-	Type of Contract  Which Debtor(s) Seek to Avoid.  The debtor(s) move to avoid lie judicial liens and non-possessory			Arrears  1. The debtor(s	) move to	avoid th	
-NON	E-	Type of Contract	<u>Arrearage</u>			nent for_	Estimate	ed Cure Period
' <u>-</u>	<del></del>		Arrearage			nent for_	Estimate	ed Cure Period
Credit	or		Arrearage		Monthly Pay	nent for	Estimate	ed Cure Period
		arrearages, if any, through payme	ents made pro rata with	other prior	ity claims or o	n a fixed	monthly	basis as
	В.	Executory contracts and unexp contracts. The debtor(s) agree to						
Credit		Type of Co	ontract					
		A. Executory contracts an contracts:	nd unexpired leases to	be rejecte	d. The debtor(s	s) reject t	he follow	ing executory
7.		ired Leases and Executory Contr	acts. The debtor(s) mo	ove for assur	mption or rejec	tion of th	e executo	ory contracts,
Credit		<u>Collateral</u>	Interest R	ate Estima	ted Claim	Mon	thly Payn	nent & Term
	C.	Restructured Mortgage Loans constituting the debtor(s)' princip payment under the Plan is due sh 1322(c)(2) with interest at the rat	oal residence upon whi all be paid by the Trus	ch the last s tee during th	cheduled contr	act paym	ent is due	before the final
-NONI	E-				Aire	arage		
Credit	tor_	<u>Collateral</u>	Regular Contra Payment	ct Estima Arrear	age on	est Rate	-	Payment on ee & Est. Term
	В.	Trustee to make contract paym regular contract monthly paymen debts shall be cured by the Truste below.	ts that come due durin	g the period	l of this Plan, a	nd pre-pe	tition arre	earages on such
-NON	E-		Payment				·	Payment
	101	<u>Collateral</u>	Contract_ A	stimated_ rrearage	Arrearage Interest Rate	Estimate Period	ed Cure	Monthly Arrearage
Credit	tor							

will file and serve separate adversary proceedings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such relief. The listing here is for information purposes only.

Creditor -NONE-

Type of Lien

Description of Collateral

Basis for Avoidance

9. Treatment and Payment of Claims.

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- All creditors must timely file a proof of claim to receive any payment from the Trustee.
- If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
- If a claim is listed in the Plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
- The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- If relief from the automatic stay is ordered as to any item of collateral listed in the plan, then, unless otherwise ordered by the court, all payments as to that collateral will cease, and all secured claims based on that collateral will no longer be treated by the plan.
- Unless otherwise ordered by the Court, the amount of the creditor's total claim listed on the proof of claim controls over any contrary amounts listed in the plan.
- Vesting of Property of the Estate. Property of the estate shall revest in the debtor(s) upon confirmation of the Plan. 10. Notwithstanding such vesting, the debtor(s) may not transfer, sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- Incurrence of indebtedness. The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total 11. of \$5,000 principal amount during the term of this Plan, whether unsecured or secured, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.
- 12. Nonstandard Plan Provisions

	None. If '	'None"	is checked.	the rest	of Part 12	need not	be completed	or reproduced
--	------------	--------	-------------	----------	------------	----------	--------------	---------------

Dated: April 4, 2018	
/s/ Barbara Ann Bland	/s/ John C. Morgan
Barbara Ann Bland	John C. Morgan 30148
Debtor	Debtor's Attorney

By filing this document, the Attorney for Debtor(s) or Debtor(s) themselves, if not represented by an attorney, also certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in the Local Form Plan, other than any nonstandard provisions included in Part 12.

**Exhibits:** 

Copy of Debtor(s)' Budget (Schedules I and J); Matrix of Parties Served with Plan

Certificate of Service

I certify that on \_\_April 4, 2018 \_, I mailed a copy of the foregoing to the creditors and parties in interest on the attached Service List.

> /s/ John C. Morgan John C. Morgan 30148 Signature 98 Alexandria Pike Suite 10 Warrenton, VA 20186 Address

540-349-3232

Telephone No.

#### CERTIFICATE OF SERVICE PURSUANT TO RULE 7004

I hereby certify that on \_\_April 4, 2018 true copies of the forgoing Chapter 13 Plan and Related Motions were served upon the

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following creditor(s): Virginia Credit Union	
by first class mail in conformity with the requirements of Rule 7004(b), F	ed.R.Bankr.P.; or
by certified mail in conformity with the requirements of Rule 7004(h), Fe	d.R.Bankr.P
	/s/ John C. Morgan
	John C. Morgan 30148

# SPECIAL NOTICE TO SECURED CREDITOR

10:	Virgi	nia Credit Union			
	Name	of creditor			
	2004	Nissan Maxima and 2007 Audi A4			
	Descr	iption of collateral			
1.	The a	ttached chapter 13 plan filed by the deb	otor(s) proposes (	check on	e):
	<b>*</b>	To value your collateral. See Section amount you are owed above the value.			n will be limited to the value of the collateral, and any treated as an unsecured claim.
		To cancel or reduce a judgment lier. Section 8 of the plan. All or a port	or a non-purchation of the amoun	se money t you are	ov, non-possessory security interest you hold. See owed will be treated as an unsecured claim.
2. the pro A copy	oposed re	thould read the attached plan carefully elief granted, unless you file and serve objection must be served on the debtor	a written objectio	n by the	ur claim is treated. The plan may be confirmed, and date specified <u>and</u> appear at the confirmation hearing. chapter 13 trustee.
	Date	objection due:			May 2, 2018
	Date	and time of confirmation hearing:			May 9, 2018 at 11:10 a.m.
	Place	of confirmation hearing:	Judge Hue	nnekens	', Courtroom 5000, 701 East Broad Street, Richmond, VA 23219
					ra Ann Bland s) of debtor(s)
			By:	/s/ Joh	n C. Morgan
			_3,	John C	C. Morgan 30148
				Signati	ure
					tor(s)' Attorney se debtor
				John C	C. Morgan 30148
					of attorney for debtor(s)
				98 Alex Suite 1	xandria Pike 0
					nton, VA 20186
				Addres	s of attorney [or pro se debtor]
				m 1 11	E 40 040 0000
				Tel.#	540-349-3232 888-612-0943

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CERTIFIC	ATE	OF	SFR	VICE

-	certify that true copies of the foregoing Notice and attached Chapter 13 Plan and Related Motions were served upon the noted above by
	irst class mail in conformity with the requirements of Rule 7004(b), Fed.R.Bankr.P; or
	certified mail in conformity with the requirements of Rule 7004(h), Fed.R.Bankr.P
on this _	April 4, 2018 .
	/s/ John C. Morgan
	John C. Morgan 30148
	Signature of attorney for debtor(s)

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Fill in this in	ormation to identify	your case:					
Debtor 1	Barbara	Ann	Bland				-
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse; # filing)	First Name	Middle Name	Last Name				
United States B	ankruptcy Court for the:	Eastern District of Virginia					
Case number	·	·			Check if th	is is:	
(If known)					☐ An ame	ended filing	
						lement showing postpetition as of the following date:	chapter 13
Official Fo	rm 106I	-			MM / DI	27 YYYY	
sched	ule I: You	ır Income					12/15
f you are sepa reparate sheet	rated and your spou	ise is not filing with you, do top of any additional page	o not include info	ormation abo	ut your spou	ou, include information about use. If more space is needed, a nown). Answer every question	ttach a
. Fill in your information	employment 1.		Debtor 1			Debtor 2 or non-filing spo	ıse
	more than one job,						
	parate page with about additional	Employment status	☑ Employed ☐ Not employe	ed		Employed  Not employed	
Include part	-time, seasonal, or						
Occupation	may include student ker, if it applies.	Occupation	Counselor an	d beauticia	IR		
		Employer's name	Central State	Hospital			
		Plavanda addusas	0004718118/	- h-!			
		Employer's address	26317 W War	snington S		Number Street	
				·			
						· · · · · · · · · · · · · · · · · · ·	
		•	Petersburg	VA	23803		
			City	State ZIP	Code	<b>,</b>	IP Code
		How long employed there	7 months			7 months	
Part 2: 6	live Details About	: Monthly Income					
	onthly income as of		. If you have nothi	ing to report fo	or any line, wr	ite \$0 in the space. Include your	non-filing
if you or you below, if you	r non-filing spouse ha I need more space, a	ave more than one employer ttach a separate sheet to this	, combine the info form.	rmation for al	employers fo	r that person on the lines	
			_	For	Debtor 1	For Debtor 2 or non-filing spouse	
2. List monti deductions	ily gross wages, sal ). If not paid monthly,	ary, and commissions (befi calculate what the monthly v	ore all payroll wage would be.	2. \$	581.25	\$	
3. Estimate a	nd list monthly over	rtime pay.		3. +\$	0.00	+ \$	
4. Calculate	gross income. Add li	ine 2 + line 3.		4. \$	581.25	\$	
				L			

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Debtor :	Barbara FretName	Mickille Narrye	Ann Lest	Bland		Cas	e number (# 1900)	vn)	<del></del>		
	-					For	Debtor 1	For Debtor 2 or non-filing spous	e		
Co	py line 4 here	### 14-14-140-15-14-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	18/19/01/01/01	***************************************	<b>≯</b> 4,	\$	581.25	\$			
5. List	ali payroli dec	luctions:									
5a	. Tax, Medicar	e, and Social Se	curity ded	uctions	5a.	s	45.65	\$			
5b	Mandatory co	ontributions for	retiremen	plans	5b.	\$	0.00	\$			
		ntributions for re		-	5¢.	\$	0.00	\$			
	_	ayments of retir			5d.	\$	0.00	\$			
	Insurance				5e.	\$	0.00	\$			
5f.	•	pport obligations	ı.		5f.	\$	0.00	\$			
	•	pport obagains.	-	•		•	0.00	\$			
	. Union dues				5g.		-		_		
nc	Other deduct	ions. Specity:			5h.	+\$	0.00	+ \$	<b>–</b> ,		
6. Ad	d the payroli d	leductions. Add l	ines 5a + :	5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$	45.65	\$	_		
7. Ca	iculate total m	onthly take-hom	e pay. Sul	otract line 6 from line 4.	. <b>7</b> .	\$	535.60	.\$			
8. List	t all other inco	me regularly rec	eived:								
8a.	Net income fr profession, o		rty and fr	om operating a business,							
		ary and necessar		business showing gross expenses, and the total	8a.	\$	400.00	\$	_		
8b	Interest and o	lividends			8b.	\$	0.00	\$	_		
8c.	Family suppor		t you, a n	on-filing spouse, or a depende	nt						
		y, spousal suppo d property settlen		pport, maintenance, divorce	8c.	<b>S</b>	0.00	\$	_		
		nt compensation	1		8ď.	\$	0.00	\$	_		
8e	. Social Securi	ty			8e.	\$	0.00	\$			
8f.	Include cash a that you receiv Nutrition Assis	ssistance and the	value (if i tamps (be	regularly receive mown) of any non-cash assistar nefits under the Supplemental subsidies.		_	0.00	_			
	Specify:				8f.	\$	0.00	\$	_		
		tirement income			8g.	\$	0.00	\$	_		
8h.	Other monthly	y income. Specif	y: <u>St.Jos</u>	seph's Villa	8h.	+\$	1,764.49	+\$			
9. Add	d all other inco	ome. Add lines 8a	+ 8b + 8c	+ 8d + 8e + 8f +8g + 8h.	9.	\$	2,164.49	\$			
		income. Add line ne 10 for Debtor 1		or 2 or non-filing spouse.	10.	s:	2,700.09	\$		\$	
				xpenses that you list in Sched r. members of your household, y			its vour mom	mates, and other			
frien	ds or relatives.		•	lines 2-10 or amounts that are		•		• • • • • • • • • • • • • • • • • • • •	. ,		
	cify:	amounts aiready	III GREGEO 1	inites 2-10 Of aniounts that are	nut av	anable	o pay expens		11. <b>+</b>	\$	0.00
				to the amount in line 11. The ets and Liabilities and Certain S				•	12.	Combi	
	you expect an No.	increase or dec	rease with	in the year after you file this t	orm?					month	ly income
	Yes. Explain:										,
					<del></del>		·		<del></del>		

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Fill in this information to identi	fy your case:				
Debtor 1 Barbara	Ann Bland		heck if this is:		
First Name Debtor 2	Middle Name Last Name	1	_	·	
(Spouse, if filing) First Name	Middle Name Last Name		An amended fill  A supplement:		petition chapter 13
United States Bankruptcy Court for the	: Eastern District of Virginia		expenses as o		
Case number (if known)			MM / DD / YYYY		
Official Form 106J	_	<del></del>			
Schedule J: Yo	our Expenses				12/15
	possible. If two married people are ded, attach another sheet to this fo n.				
Part 1: Describe Your Ho	ousehold				
1. Is this a joint case?					
No. Go to line 2.			•		
Yes. Does Debtor 2 live in a	separate household?				
☐ No☐ Yes. Debtor 2 must	file Official Form 106J-2, Expenses for	or Separate Household of	Debtor 2.		a Managaran San Sandan and Sandan Sandan Sandan
2. Do you have dependents?	□ No	Dependent's relations	hip to	Dependent's	Does dependent live
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information f		·	age	with you?
Do not state the dependents'	•	Son		17	☑ No ☑ Yes
names.					□ No
					Yes
					□ No □ Yes
					□ No
					☐ Yes
			<del></del> .	<del></del>	□ No □ Yes
. N					U Tes
<ol><li>Do your expenses include expenses of people other than yourself and your dependents?</li></ol>					
Part 2: Estimate Your Ong	oing Monthly Expenses				
_	ur bankruptcy filing date unless yo unkruptcy is filed, if this is a suppl				
include expenses paid for with no	on-cash government assistance if ed it on Schedule I: Your Income ((	•		Your expe	nses
	expenses for your residence. Incl		nts and		274.00
any rent for the ground or lot.			4.	<b>&gt;</b>	217.00
If not included in line 4:					0.00
4a. Real estate faxes	rantore incursace		4a.	\$	0.00
4b. Property, homeowner's, or			4b. 4c.	\$	
Home maintenance, repair      Homeowner's association	•		4C. 4d.	\$	0.00
4d. Homeowner's association	or configuration reges		₩U.	Ψ	

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Debtor 1 Barbara Ann Bland Case number (# Annown).

			Your exp	enses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
•	6a. Electricity, heat, natural gas	6a.	s	350.00
	6b. Water, sewer, garbage collection	6b.	S	127.00
	8c. Telephone, cell phone, internet, satellite, and cable services	6c.	\$	342.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	300.00
8.	Childcare and children's education costs	8.	s	0.00
9,	Clothing, laundry, and dry cleaning	9.	\$	50.00
10.	Personal care products and services	10.	\$	25.00
11.	Medical and dental expenses	11.	\$	0.00
12.	Transportation. Include gas, maintenance, bus or train fare.		•	240.00
	Do not include car payments.	12.	<u> </u>	
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	234.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify: Vehicle taxes	16.	\$	20.00
17.	installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	159.00
	17b. Car payments for Vehicle 2	17b.	\$	236.00
	17c. Other. Specify: Booth Rental	17c.	\$	240.00
	17d. Other. Specify:	17d.	\$	
18.	Your payments of allmony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.			
	Specify:	19.	\$	0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.		
	20a. Mortgages on other property	20a.	\$	0.00
	20b. Real estate taxes	20b.	\$	0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00

Page 13 of 19 5 Entered 12/02/16 14:10:10 Desc Main Doc 2 Case 16-35915-KRH Filed 12/02/16 Page 28 of 44 Document Barbara Bland Ann Debtor 1 Case number (# Im 0.00 21. Other. Specify: 22. Calculate your monthly expenses. 2,627.00 22a. 22a, Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 0.00 22b. 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. 2,627.00 23. Calculate your monthly net income. 2,700.09 23a. Copy line 12 (your combined monthly income) from Schedule I. 2,627.00 23b. Copy your monthly expenses from line 22c above. 23b. 23c. Subtract your monthly expenses from your monthly income. 73.00 The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? M No. ☐ Yes. Explain here:

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			20041110110		
Fill in this i	nformation to ider	tify your case:			
Debtor 1	Barbara	Ann Middle Name	Bland		
Debtor 2					
(Spouse, if filing		Middle Name	Lest Name	_	
United States Case number		the: Eastern District of \	/irginia		
(If known)			<del></del>		Check if this is ar
					amended filing
Officia	d Form 106	Dec			
	<del> </del>				
Decl	aration	About an	Individual	Debtor's Schedules	12/15
if two mar	ried people are fil	ing together, both are	equally responsible for s	supplying correct information.	
				ed schedules. Making a false statement, concealin te can result in fines up to \$250,000, or imprisonme	
years, or i	oth. 18 U.S.C. §§	152, 1341, 1519, and 3	571.	re çan result in inies up to 4200,000, or implisoring	sint for up to zo
•.			•		
	•				
	Sign Below		•		
	·				
Did vo	u pav or agree to i	sav someone who is N	OT an attorney to bein y	ou fill out bankruptcy forms?	
₩ No					
	s. Name of person			. Attach Bankruptcy Petition Preparer's Notice, Declaration	n. and
			-	Signature (Official Form 119).	.,
				•	
	penalty of perjury, by are true and co		ead the summary and so	hedules filed with this declaration and	
	.,				
	1 /	2/) 1			
× b	Ware K	Jana	×	•	
Signeta	ire of Debtor 1		Signature of Deb	tor 2	
-	.1 /				
Date <b>[</b>	2/02/2010	<u> </u>	Date		
74	איין מט איין או		MM / DD /	YYYY	

Doc 51 Filed 04/04/18 Entered 04/04/18 13:20:32 Case 16-35915-KRH Page 15 of 19 6 Entered 12/02/16 14:10:10 Document Doc 2 Case 16-35915-KRH Filed 12/02/16 Page 30 of 44 Document · Fill in this information to identify your case. Bland Barbara Ann Debtor 1 Debtor 2 Milita Mana United States Bankruptcy Court for the: Eastern District of Virginia Check if this is an (If known) amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 04/16 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? Married 12 Not married 2. During the last 3 years, have you lived anywhere other than where you live now? Yes. List all of the places you lived in the last 3 years. Do not include where you live now. **Dates Debtor 2** Dates Debtor 1 Debtor 2: Debtor 1: lived there lived there Same as Debtor 1 Same as Debtor 1 From From \_ Number Street Number To To State ZIP Code City State ZIP Code Same as Debtor 1 Same as Debtor 1 From From

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

City

Τo

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

State ZIP Code

Part 2:

**Explain the Sources of Your Income** 

Number

City

Τo

**7IP Code** 

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# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

Richmond Division

In re Barbara Bland

Case No.

Chapter 13

Debtor(s)

### **COVER SHEET FOR LIST OF CREDITORS**

I hereby certify under penalty of perjury that the master mailing list of creditors submitted either on computer diskette or by a typed hard copy in scannable format, with Request for Waiver attached, is a true, correct and complete listing to the best of my knowledge.

I further acknowledge that (1) the accuracy and completeness in preparing the creditor listing are the shared responsibility of the debtor and the debtor's attorney, (2) the court will rely on the creditor listing for all mailings, and (3) that the various schedules and statements required by the Bankruptcy Rules are not used for mailing purposes.

Master mailing list	of creditors submitted via:
(a)	computer diskette listing a total of creditors; or
(b)	scannable hard copy, with Request for Waiver attached, consisting of pages, listing a total of creditors
	barbara Bland
	Debtor
	Joint Debtor
Date: 12/2//6	[Check if applicable] Creditor(s) with foreign addresses included on disk/hard copy.

[diskcs ver. R-1/2003]

Page 17 of 19 Case 16-35915-KRH Doc 6 Filed 12/02/16 Entered 12/02/16 14 Document Page 2 of 4 UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA Division Richmond In re Barbara Bland Case No. Chapter 13 Debtor(s) REQUEST FOR WAIVER The debtor(s) hereby request(s) that the Court waive the requirement of the

The debtor(s) hereby request(s) that the Court waive the requirement of the mailing matrix submission on a computer diskette as required by LBR 1007-1. Due to financial constraints and the inability to access the equipment necessary to comply with this requirement, the petitioner requests acceptance of the matrix submitted in the hard-copy scannable format.

The debtor understands that if the court denies the request, the debtor or the attorney for the debtor shall submit the list of creditors on computer diskette no later than three (3) business days after the clerk's notification that the request has been denied.

Debtor

Joint Debtor

Date: 12/2/16

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### Barbara Ann Bland List of Creditors

Avant 222 N. Lassallie Suite 1700 Chicago, IL 60601

PayPal PO Box 45950 Omaha, NE 68145

CashNetUSA 175 West Jackson Suite 1000 Chicago, IL 60604

TD Bank USA/Target Credit PO Box 673 Minneapolis, MN 55440

Kohls Department Store PO Box 3115 Milwaukee, WI 53201

Capital One PO Box 30281 Salt Lake City, UT 84130

Macy's Department Store PO Box 8218 Mason, OH 45040

Virginia Credit Union 7500 Bouldersview Drive Richmond, VA 23225

SYNCB/Wal-Mart PO Box 965024 El Paso, TX 79998

Discover Bank PO Box 15316 Wilmington, DE 19850

US Dept of Education 2401 International Lane PO Box 7859 Madison, WI 53704 Case 16-35915-KRH Doc 51 Filed 04/04/18 Entered 04/04/18 13:20:32 Desc Main

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Virginia Credit Union PO Box 6713 Richmond, VA 23230